

REPORT OF UNCLAIMED PROPERTY

HOLDER (Name of Business)	REPORT YEAR 19 ____	TYPE OF REPORT (1) ____ CASH ____ SECURITIES ____ TANGIBLE
ADDRESS	FED ID#	
CITY, STATE, ZIP	PERIOD COVERED	
	FROM: _____	TO: _____

[illegible]

MUST BE TYPED

NUMBER THE OWNERS SEQUENTIALLY (1)	PROPERTY CODE (2)	OWNER(S) NAME, ADDRESS, CITY, STATE & ZIP LIST ALPHABETICALLY BY LAST NAME, FIRST AND MIDDLE INITIAL, (IF JOINT OWNER, BENEFICIARY, TRUSTEE, ETC., SPECIFY BY NAME.) (4)	OWNER SOCIAL SECURITY NUMBER (5)	DATE OF LAST TRANSACTION/DATE PROPERTY BECAME PAYABLE, REDEEMABLE, OR RETURNABLE (6)	AMOUNT DUE OWNER BEFORE DEDUCTION AND WITHHOLDING (7)	DEDUCTION OR WITHHOLDING (SEE INSTRUCTIONS)	AMOUNT/ NUMBER OF SHARES REMITTED AS DUE OWNER (9)	INTEREST RATE (10)	Description of Tangible Property, Mutual Funds, Securities (to include CUSIP# where applicable). Or comments (see instructions). (11)
	IDENTIFYING NUMBER (3)					TYPE AMOUNT (8A) / (8B)			
EXAMPLE: 1.	AC02 1234567	PUBLIC, JOHN Q. PUBLIC, MARY Z. (co-owner) 1234 Any Street Any City, State and Zip Code	000-00-0000	01/06/1991	\$55.00	SC / \$5.00	\$50.00	6.00%	JOHN PUBLIC'S DOB: 09/10/1961 Account Opened 05/02/1972
TOTALS BROUGHT FORWARD FROM PREVIOUS PAGE					\$	\$	\$		
SUBMIT YOUR REPORT AND REMITTANCE BY NOVEMBER 1 OF REPORT YEAR (MAY 1 FOR INSURANCE COMPANIES)					\$	\$	\$	TOTALS CARRIED FORWARD TO NEXT PAGE	